



The self-reporting of physical and mental health is an important tool in health research and the delivery of services. One's own perception of health status has been shown in many studies to be a better predictor of morbidity and mortality than many more objective measures of health (Idler and Benyamini, 1997) and has been used extensively to predict levels of future burden on the health care delivery system (Pijls et al., 1993).

The 2001 Medical Outcomes Study SF-12 Report provides information on the self-reported physical and mental health status of adult Utahns from the 2001 Utah Health Status Survey. This report is meant to complement the information found in other reports published by the Utah Department of Health, Office of Public Health Assessment.

Self-reported health was measured with the second version of a 12-question module called the SF-12 that was developed and tested by QualityMetric Incorporated. The SF-12 is a shortened version of the SF-36, which also measures self-reported physical and mental health. The questions in the SF-12 target eight dimensions of health and are weighted and summed to provide two composite measures, the Physical Composite Scale and Mental Composite Scale (PCS and MCS). The PCS and MCS are scored to range from 0 to 100, with 0 indicating the lowest level of health and 100 indicating the highest level of health. All other indicators of health used in this report [i.e. age-specific mean difference scores, above average/below average physical/mental health] are derived from these two original measures.

The PCS and MCS were calculated for several socio-demographic groups, such as sex, age, sex and age groups, education level, annual household income, and poverty status, to assess the health of different population groups in Utah. Measurements of chronic disease and medical problems were also tabulated for socio-demographic groups to assess the association that these factors have with health outcomes (as measured by the PCS and MCS). It is hoped that this report will provide a portrait of the general health status of adult Utahns, as well as provide a profile of Utahns who suffer from poor physical and mental health, as measured by the SF-12.

Questions from the SF-12 (with the exception of the general health question) were asked only of randomly chosen adult respondents. This is because it was believed that the respondent would be unable provide accurate proxy answers for other SF-12 items for other household members. Because of this, the following report is representative of the adult population in Utah, but does not apply to those under 18 years of age. Within this report, it is common for a measure to be reported for only a sub-population of Utahns. For example, several tables provide a profile of only those Utahns with poor physical health or poor mental health. Other tables provide information for only those Utahns who suffer from specific chronic illnesses or medical problems. The sub-population of inference is always indicated in the title of the figure or table.

An attempt was made to present the information in this report in a meaningful manner. Reference tables are embedded within the report and follow the graphic presentation of results (i.e. pie charts and bar charts). Additional information, not presented in figures, is also provided in the reference tables. There are two types of reference tables used in this report. The first type provides average measures for the PCS/MCS scores and their respective difference scores, by various socio-demographic variables. The second type of reference table typically reports an overall percentage for the relevant Utah population, and for that population by demographic grouping variables such as sex, age group, age group by sex, annual household income, educa-



tion level, employment status, Hispanic status, marital status, and poverty status. Additional comparisons for each measure may be found in that measure's detailed health status survey report, or by requesting it through the Center for Health Data at the address listed inside the front cover of this report.

The information in the tables and figures is presented for different sex and age groups, different lifestyle factors and the presence of chronic illnesses. By presenting the information this way, it is not meant to imply that differences in a measure are caused by a person's sex, age, presence of chronic illness, or any other variable in the survey. Data collected in a single-point-in-time survey will never provide sufficient evidence of a cause and effect relationship between two variables. For instance, although a relationship between obesity and overall ill health has been observed, the data do not suggest whether being obese causes ill health, being ill causes one to be obese, or whether some third variable, such as a chronic condition, causes a person to be obese and to experience overall ill health.

This report does not include all of the information necessary to understand the health of populations in Utah. There is other relevant information that should be taken into account in order to gain perspective on Utahns' overall health status, such as leading causes of death, trends in hospitalization for various conditions, infectious disease rates, characteristics of mothers and newborns, injury deaths and hospitalizations, and many other factors. Some of this information can be found in other Center for Health Data publications and on Utah's Indicator-Based Information System for Public Health (IBIS-PH) at <http://ibis.health.utah.gov/>. In addition, the Behavioral Risk Factors Surveillance System is a source for additional survey information on adult Utahns' health behaviors.